U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

# FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended, Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

	For Official User Only NE 19205
E	3 2

1. File Number U - // 1004

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2, Fiscal Year Covered From:

<b>,</b> 	1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name Richard Metcalf	Name Laborers' International Union of North America			
	Labor Organization File Number 000-131			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 905 16th Street, N.W.	Street 905 16th Street, N.W.			
City Washington	City Washington			
State District of Columbia ZIP Ccde + 4 20006-1703	State District of Columbia ZIP Code + 4 20006-1703			
5. Position in labor organization.  Director, Corporate Affairs Dept.				
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):				
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
6. Name and address of Employer (including trade മമ്പം, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street	7.b. Amount.			
Silver Si				
City				
State ZIP Ccde + 4				
Sig	pature			
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been excrnined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)				
$\Omega$				
Signed ( SSC)	on 8-12-05 202-942-2249			
	Date Telephone Number			

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a

ZIP Code + 4

or Consultant

?

File Number U-

substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: Name Greg Kinczewski, Marco Consulting Group a. Labor Organization Trade Name, if any: X b. Trust P.O. Box, Bldg., Room No., if any Suite 90 c. Employer Street 550 West Washington Boulevard Chicago ZIP Ccde + 4 60661-2560 State Illinois 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. Marco Consulting Group provides financial consulting Name Buffalo Laborers' Benefit Fund and proxy voting services to the Buffalo Laborers' Benefit Fund. Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 200 Street 2750 Harlem Road unknown 11.b. Approximate dollar value of such dealing. City Buffalo 12.a. Nature of interest held or income received. 7/28/04: Lunch with a representative from Marco ZIP Code + 4 14225-4024 State New York Consulting Group \$42 12.b. Amount. C. Received from any employer (other than an employer covered under parts A and B abova) or from any labor relations consultant to an employer any payment of money or other thing of value. 14.a. Nature of payment. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any:

14.b. Amount of payment

Street

City

State

P.O. Box, Bldg., Room No., if any

13.b. Is the Business an Employer

Name of Person Filing Richard Metcalf

File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

Name and address of Business (including trade name, if any).	9. Business deals with:
Name Greg Kinczewski, Marco Consulting Group	a. Labor Organization
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any Suite 90	b. Trust
Street 550 West Washington Boulevard	c. Employer
City Chicago	
State Illinois ZIP Code + 4 60661-2560	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Buffalo Laborers' Benefit Fund	Marco Consulting Group provides financial consulting and proxy voting services to the Buffalo Laborers' Benefit Fund.
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any Suite 200	
Street 2750 Harlem Road	
City Buffalo	
State New York ZIP Code + 4 14225-4024	11.b. Approximate dollar value of such dealing. Un Kno ພ ຕ
	12.a, Nature of interest held or income received.
	9/26/04: Dinner with a representative from Marco Consulting Group.
	12.b. Amount. \$112

Name of Person Filing Richard Metcalf

File Number U-

### Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

9. Business deals with: 8. Name and address of Business (including trade name, if any). Name Ron Luraschi, Amalgamated Bank 🗙 a. Labor Organization Trade Name, if any: b. Trust P.O. Box, Bldg., Room No., if any c. Employer Street 15 Union Square City New York ZIP Code + 4 10003-3378 State New York 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. Amalgamated Bank provides banking services to the Name Laborers' International Union of North America. Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City ZIP Coce + 4 State 11.b. Approximate dollar value of such dealing. Unknown 12.a. Nature of interest hald or income received. 11/29/04: Dinner with a representative from Amalgamated Eank. 12.b. Amount. \$114

# Addenda to Form L.M-30: Labor Organization Officer and Employee Report

## RICHARD METCALF

File Number U -

Laborers' International Union of North America, Organization File Number 000 -131 Fiscal Year Covered From: 1/1/04 through 12/31/04

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## ADDENDUM A

It is conceivable that I received the benefit of a meal, refreshment or social event from an individual who may be employed by a reportable entity under the Labor-Management Reporting and Disclosure Act, which I did not report because I do not have any records of these encounters and have no specific recollection of any benefits received.

## ADDENDUM B

I am not reporting any benefits that I may have received from a political action committee ("PAC"). My understanding is that PACs report all receipts and disbursements under the Federal Election Campaign Act, and I do not need to report under the Labor-Management Reporting and Disclosure Act.

## ADDENDUM C

I am not reporting any benefits that I may have received in 2004 from labor organizations affiliated with the Laborers' International Union of North America ("LIUNA"), my employer, or other labor organizations. My understanding of guidance received by the AFL-CIO from the Department of Labor is that benefits received from LIUNA-affiliated labor organizations and other labor organizations are not reportable on the LM-30 report, and I am following that guidance.

Richard Metcalf Director, Corporate Affairs Department Laborers' International Union of North America 905 16<sup>th</sup> Street, NW Washington, DC 20006

August 15, 2005

U.S. Department of Labor Employee Standards Administration Office of Labor-Management Standards 200 Constitution Avenue, NW Room N-5616 Washington, D.C. 20210

> Re: Form LM-30 Filing for Richard Metcalf, U-Labor Organization File No. 000 - 131

Dear Sir or Madam:

Enclosed is my Labor Organization Officer and Employee Report LM-30 for the 2004 reporting period. In filing the report, I have reviewed all of my available 2004 records as well as my recollection of benefits I may have received. I have provided my best estimate or an estimated price range for the value of the benefit received where I have no knowledge as to an exact amount. Further, in completing the LM-30 report, I have consulted with legal counsel and have obtained and have relied upon legal advice.

As you know, it was not until March of this year that the Department of Labor initially announced its intention to provide additional guidance to the reporting community concerning the LM-30 report, to seek systemic compliance with these requirements, and to apply standards adopted in 2005 retroactively to 2004 as a base year in that effort. Further, the Department since that time has continued to issue and revise its compliance advice, including guidance regarding related benefit funds. My understanding is that the Department's guidance to date on LM-30 reporting is still changing and remains uncertain in various particulars.

It may be possible that a covered employer or business not listed on my LM-30 report for 2004 provided something of value as to which I have no documentary record nor any present specific recollection. In accordance with your guidance, it is my understanding that, in that circumstance, I am not required to take any further action.

This filing reflects my good faith effort to comply with the LM-30 reporting provisions and in doing so, I have relied upon the advice of legal counsel and the evolving guidance from the Department. The enclosed material represents my best recollection and estimate of all

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lawfully reported benefits that I received in 2004. By reporting any items on this LM-30 Report, I do not concede that any of the items must be reported under 29 U.S.C. 432, or that I did not receive such items within the provisions of 29 U.S.C. 186(c).

Sincerely,

Richard Metcalf

Enclosure